



CIRURGIA VITREORETINIANA E TRAUMATOLOGIA

08:30 | 10:45 SALA NEPTUNO

Mesa: David Martins, Natália Ferreira, Ricardo Faria

09:50

VD11- SMALL GAUGE PARS PLANA VITRECTOMY IN THE SETTING OF BOSTON TYPE 2 PERMANENT KERATOPROSTHESIS – A SURGICAL CHALLENGE

Mário Canastro¹, Fadi Maalouf², Carlos Mateo²

(¹Hospital de Santa Maria - CHLN, FML, ²Institut de Microcirurgia Ocular)

Introduction: Vitreoretinal complications after keratoprosthesis (KPro) implantation are a cause of severe visual loss. The purpose of this video is to describe the complex operative techniques employed in performing small-gauge pars plana vitrectomy (PPV) in eyes with Boston type 2 KPro.

Methods: 2 cases of eyes with Boston type 2 KPro were diagnosed with vitreoretinal complications (Epiretinal membrane and tractional retinal detachment) requiring surgical correction. A 23G PPV was performed through the permanent Boston type 2 KPro using a direct contact lens system. Depending on the case, a combined scleral buckling, retroprosthetic membrane removal, epiretinal membrane peeling, laser photocoagulation and silicone oil injection was performed. Both surgeries were done by the same surgeon (CM). A detailed description of the surgical techniques and manoeuvres used during the procedure was shown.

Results: The patient's initial diagnosis, pre and post-operative visual acuity (VA), the time to complication, concomitant procedure and posterior segment complication were registered. No unexpected intra operative complications were encountered. All patients had anatomic success with an attached retina and a clear visual axis. Both patients had a VA improvement after the surgery.

Conclusion: Vitreoretinal surgery in patients with Boston type 2 KPro is highly complex and challenging. Modern PPV techniques can be safely used to solve most vitreoretinal complications with good final anatomical and functional results.